ISSUE SLIP STAPLE AREA (for additional cross references)

	INTTIALS	ID NO.	DATE
POSITION	No. of Concession, Name of		
FEE DETERMINATION	PS	66621	12/6
O.I.P.E. CLASSIFIER		101008	7/13/00
FORMALITY REVIEW		Journal	1.04
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

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	53	╼┼╌┼╌┼╌┼╌┤	104	
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20	77	<del>╺┡╺┡</del> ╌┼	128	
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35	86	<del>-   -   -   -   -   -   -   -   -   -  </del>	136	
36		╼┾╼┼═┼═┼═┼═┼	137	
37	87	╼╂╼╁╼╂╼╂╼╂╌╂	138	
38	88	╾╂╼╁╼╂╼╂╼╂╼╃	139	
39	89	╼┼╼┼╼┼╼┼╼┼	140	
40	90			
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44	94	<del>╎┈╎┈╎┈</del> ┼┈┼┈┼┈┼	145	
45	95	<del>╽╶┨╼┞╺</del> ╁╾╂╼╄═┿═	146	
46	96	<del>┡╺┡</del> ╌┼╌┼╌┼╌┼╌┼╌	147	
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If more than 150 claims or 10 actions staple additional sheet here

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